

# Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Massachusetts File with: City or Town Clerk or Election Commission
ill in Reporting Period dates: Beginning Date: 1/1/2014 Ending Date: 1/31/2014
ype of Report: (Check one)
30 day after election 💢 year-end report 🔲 dissolution
WILLIAM H. DUIGHT : COMMITTER TO RECT BILL DUIGHT
Office Sought and District  Office Sought and District  Name of Committee Treasurer
39 MIRTUE ST. MONTHANDING MA 145 STATE ST. MONTHANDING MA
Residential Address 01060 Committee Mailing Address
Celephone Number (optional): Telephone Number (optional):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report 744, 24
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2)
Line 4: Total expenditures this period (page 5, line 14)
Line 5: Ending Balance (line 3 minus line 4)
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7)
Line 8: Name of bank(s) used: FLARNCE SAUNG BANK
Affidavit of Committee Treasurer:  certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures disbursements, in kind contributions and liabilities for this reporting period and represents the campaign inance activity of all persons acting under the authority of on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  (Treasurer's signature)  Date:    L
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
Candidate with Committee and no activity independent of the committee  Certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filing separate report  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority of on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: (Candidate's signature) Date: 1.20.15

#### SCHEDULE A: RECEIPTS

M.G.L. c..55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the upation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

"Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to ort all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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ine 9: Total Rec	eipts over \$50 (or listed above)		
	ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		ne 9. Line 10 sho	uld include only those receipts not itemized above.

### SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Expenditures over \$5	50 (or listed shove)	
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i.	• .	Line 13: Expenditures \$50 and under* (not listed above)		
	. Enter on nage 1 line 4 -	Line 14: TOTAL EXPENDE	TIIRES IN THE DEDICE.	
* T.C 1	emized expenditures of \$50 and unde	· ·	•	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well is those liabilities incurred during this reporting period.

ate Incurred	To Whom Due	Address	Purpose	Amount
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## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

ase itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be led together from the committee's records and included in line 16 on page 1.

e Received	From Whom Received*	Residential Address	Description of Contribution	Value
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		Line 15: In-Kind Contribution	s over \$50 (or listed above)	-
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• ;*		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1 line 6 →	Line 17: TOTAL IN-KIND (	ONTRIBITIONS	
	tribution is received from a person w			<u></u>

f an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.